497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

				T		Date Stamp	CALIFO	DNIA 40 T
NAME OF FILER				Date of 08/21/2020 This Filing			CALIFO FOR	
Joe Males City Council 2020				This Filing		RECEIVED		
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)			Report No.		A160 2 t. 2000	For C	Official Use Only	
OTDEST ADDRESS					AUG 2 1 2020			
STREET ADDRESS				Amendment		City Clerk's Office City of Hemet		
	OTATE ZID CODE			to Report No		City of Hemet		
CITY	STATE ZIP CODE			No. of Pages	1			
Hemet	CA 92545			No. or rages				×
1. Contribution(s) Received								
DATE RECEIVED	FULL NAM	E, STREET ADDRESS A (IF COMMITTEE, ALSO	ND ZIP CODE OF CONTRIBU ENTER I.D. NUMBER)	ITOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
08-21-2020	Hemet Firefighter P.O.Box 1407 Hemet, CA 92546		,	☐ IND ☑ COM ☐ OTH			\$5,000.00	
	ID# 1331855			□ PTY □ SCC			Provide interest rate	
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC			☐ Check if Loan
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC			☐ Check if Loan
Reason for Amendment:						**Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee		